

Service Area Authorities

EXHIBIT 1

DATE 4-2-07

SR 93

1. There are three: Eastern Service Area Authority, Central Service Area Authority, Western Service Area Authority.
2. SAA's are mandated by statute to work collaboratively with DPHHS to plan, implement and oversee the mental health system. SAA's are not "advisory." SAA's may not actually provide mental health services. See §§ 53-21-1001 to 1013, MCA.
3. Each SAA is a membership organization. The only membership criteria is residency in the Service Area. The 20-director Boards are elected at an annual membership "Congress" in each Area.
4. Each SAA is separately incorporated. The Boards meet monthly. The Department provides each SAA with \$15,000 per year to for travel to Board and Congress meetings.
5. Directors must be majority consumer and family members; the balance includes advocates, providers, county commissioners and others, but no state government employees.
6. In each Service Area there are a number of Local Advisory Councils for mental health. Each LAC is represented on an SAA Board. The LAC's are informal groups that meet to share information and work to improve community mental health services. The Helena LAC, for instance, organized the first Crisis Intervention Training for law enforcement officers in the state.
7. By statute, each SAA has to write a report every two years (the first ones will be done in January 2008), that reviews and evaluates the services needs and services in each Area. All three SAA's have started developing strategic plans for their Areas and have begun to discuss applying jointly for a grant to pay for staff.
8. Area boundaries were determined by the Department so as to equalize mental health expenditures between areas. The ESAA has a very large area and some Directors attend Board meetings by video-conferencing.
9. Responding to mental illness is both a local and state responsibility. SAA's bridge local, regional and state planning efforts. They are an independent, informed source of leadership and expertise for local officials, the Department and lawmakers.
10. Though the Department and SAA's have not yet developed a good working definition of "collaboration," the Department has been a strong and consistent supporter of supporter of SAA's. The SAA's consider themselves the grass roots leadership for mental health system reform.